

<Article>Poverty and Old-Age Problem of Rural Families Living in Subsistence Level, Bangladesh

著者	Azam Golam
journal or publication title	年報筑波社会学
number	13
page range	52-71
year	2001-10
URL	<a href="http://hdl.handle.net/2241/108049">http://hdl.handle.net/2241/108049</a>

<ARTICLE>

## **Poverty and Old-Age Problem of Rural Families Living in Subsistence Level, Bangladesh.**

Golam Azam\*

*This paper is an attempt to discuss the survival pattern of the rural poor aged living in subsistence level. The main focus of this paper is to represent survival pattern of the poor aged especially with reference to their economic activities, food intake, housing and living arrangements. This paper also suggests some realistic policy measures so that the poor aged can survive with the satisfaction of their basic needs in the terminal part of their life."*

### **INTRODUCTION**

Two centuries after industrial revolution, most of the world still has to contend with the daily pain of poverty. Nearly half of the world's people live in poor countries with an average annual income per head of \$400 or less. The population in poor countries increase by nearly 850 million by the year 200, there will be four times more people in the LDCs than in the industrial countries (Gerald, 1990, p. 434). Bangladesh as one of the poorest countries of the LDCs is not immune from the increasing pressure of population growth and poverty.

Bangladesh ranks as the world's eighth and Asian's fifth most populous country with a land area of only 144,000 sq. km. resulting in a population density of about 939 persons per sq. km. which is one of the

---

\* Assistant Professor, Institute of Social Welfare and Research, University of Dhaka, Bangladesh, and presently Ph D Candidate at the Institute of Social Sciences, University of Tsukuba, Japan.

\*\* This paper is written with the assistance of Shahidul Islam who worked as co-researcher in the study, and has been doing research work as M. Phil. Research Fellow at the Institute of Bangladesh Studies, University of Rajshahi, Bangladesh.

highest in the world. In 1994 the total population of Bangladesh was about 120 million (Rahman, 1994). Now the estimated population is 127,117,967 (July 1999 est.). Poverty, however, is chronic and endemic in this country. With a continuous food shortage, an estimated 35.6% of population are below poverty line<sup>1</sup> (1996 est.). About 30 percent of the population have less than 1600 (Calorie) and 45 percent have less than 1800 (Calorie) per capita consumption. The situation in rural areas is even worse than in urban areas. In recent years, rural Bangladesh is overwhelmingly characterized by poverty, disease, malnutrition, illiteracy and unconsciousness that dominate the lives of the rural poor. As Bangladesh is one of the poorest countries in the world having a per capita G.N.P of US\$ 350 (World Bank Report, 1998), the rural per capita income of this country is much below the national average<sup>2</sup>. Over 80% of the country's populations live in the rural areas, 60% of rural populations are functionally landless, 20 % do not even own their homestead. Majority of them are directly or indirectly dependent on agriculture and selling labor. In addition, due to the domination of the society by the rural elites, the upper socio-economic strata own most of the available resources. The rural poor (being unorganized and powerless) are victims of various kinds of oppression, deprivation and injustice. Bangladesh is an overpopulated country having population growth rate of 1.59 percent (1999 est.), which is considered high in the context of limited resources.

Although Bangladesh has one of the highest mortality levels in Asia, a considerable decline has taken place since the 1950s. The crude death rate was observed to be about 15 per 1000 in the early 1980s, against 40 in the 1940s. Despite the fact that the mortality situation in Bangladesh is generally characterized by high infant and child mortality. At present, the slight decline of mortality is observed in the country especially due to technological development, sophisticated medical treatment, improved sanitation and balanced dietary and calorie intake. This decline of mortality, however, brings about in the long run, immoderate changes in the age structure of population, which are labeled as a relative aging of the population. This means that the population of the population in the higher age groups 60 and older is increasing. Life expectancy of total population now is 60.6 years (1999 est.). The projected figure for the elderly population in Bangladesh for 1995 was 6 percent or a total of over 6200,000. This figure is likely to



reach 1770,000; i.e., more than 10 percent of a total projected population of over 17.7 crores (177,000,000) for the country in 2025.

In rural Bangladesh, the most important issue that needs highlighting in the case of society's elderly in the management of the terminal part of life. This is becoming a tough affair for increasing number of people in the society much as it has been in all other societies of the world including especially more prosperous, healthier and developed world. Attention, however, is generally claimed mostly by the poor rather than any specific group of human in distress. For old people in the sixties or beyond, the environment either in the home or outside is frankly most unfriendly barring the few honorable exceptions where foresight and pre-planning may help mollify the agonies of age. But, at the moment our interest is not this class of elderly in the society. They are more or less outsiders in the sense they can take care of themselves.

Of late, the old age problem is closely related with poverty and other issues affecting the lives of the rural elderly. In rural setting, nuclearization of family pattern (husband-wife-children group) is predominant in the residential and composition pattern of families, which are conducive to the problems of old age. But disappearing the jointness of living, migration of earning adult sons are very influential in creating some problems as the elderly are left behind, uncared for and lonely. Also, the elderly experience hardship due to frequent interruption in the flow of funds needed for their economic support and health care. Even social and group support in times of crisis does not come forward readily. The elderly are more often at a disadvantage because of the lack of medical and health facilities and economic support as well.

Nowadays in rural setting, the quality and extent of familial relationship that are essential for the success of joint-living, financial and emotional security and psychological support are being deteriorated because of the disinterest of adult income earners in living with the elderly parents and also of inability to maintain family and care giving for the elderly. In agricultural living, reciprocal role among the family members are now disappearing alarmingly due to poverty and establishment of nuclear family (or biological family) of the young adults. In this pattern of family, extended kinship networks are being downgraded as quickly as the family is

undergoing changes with diverse socioeconomic problems and other straits. As a result, the aged who are much more vulnerable in terms of basic needs, help from the family of origin and other kin, are experiencing sufferings mainly due to lack of the "giving-receiving" services rendered especially to the well-being of the aged. The elderly of the rural poor families are experiencing a myriad of problems such as housing, food, financial straits, health and hygiene, illiteracy, ignorance and so on. At present, certain development programs especially for the people of grass-root levels or backward section of population are being launched by governmental and non-governmental organizations. But there are no relevant institutional services for the elderly because of the absence of social policy, political will and commitment of the government and other constraints. In particular, the unorganized society in rural areas receives little attention or support through governmental programs. While planning services for the unorganized sector, the special needs of the aged who are landless agricultural laborers, small and marginal farmers and rural underemployed are not kept in mind. Also, emphasis is not placed on the development of community-based organizations that are in a position to mobilize resources from the community.

In view of the social crises concerned with the poor rural elderly, a need for social investigation with a view to understanding present condition of the elderly has strongly been felt. However, the present study conducted in the selected villages made effective efforts to present fruitful findings, i.e., survival pattern of the rural elderly, their needs and problems.

### **Methods of the Study**

This paper is based on data taken from a qualitative as well as descriptive study conducted in two villages of Boalia Thana (Township) under the district of Rajshahi, Bangladesh. The sample populations of the study, selected using convenience sampling<sup>3</sup> procedure, were poor elderly over 60 years of age, living mostly under poverty line or in subsistence level. They were vulnerable particularly in terms of economic sustainability, social security, emotional support, health care and other basic necessities of life. In addition, income capacity, land ownership (less than one acre<sup>4</sup>), degrees of



dependency on children or relatives, position in the family or community were considered in sample selection. The core data for the study were collected from 50 poor elderly, both male and female, some of whom were widowers and widows. Data were collected through observations, open discussion and interviewing without using any schedule. Focus group discussions were used as supplementary technique of data collection to get qualitative data about the research population. A few case studies were also used to get in-depth information about the elderly. Observations and case studies were the main techniques of gathering information in the study. Data have been analyzed and presented in the study by using the interpretive<sup>5</sup> and descriptive procedures of qualitative data analysis.

### **Concept of Poverty, Old-Age and Aging**

**Poverty:** Poverty is multidimensional concept. It is related to the notion of well-being (Kambur, 1987). It refers to a variety of conditions involving differences in income, wealth and deprivation and access to opportunities (Chen, 1986, pp. 14-15). Poverty has many faces, changing from place to place and across time, has been described in many ways. Poverty is a situation people want to escape (The World Bank Group). Poverty is now no longer understood as an absolute threat to physical existence (subsistence poverty) but as the situation of people who do not achieve the standard of living that is usual in their own society. Poverty implies the existence of social inequality and not only denotes the relative disadvantage of one group compared with others, it implies a threshold. A household is considered poor when its income is below a certain level and its member thereby deprived of the material and other conditions necessary for proper participation in the society in which they live. Poverty is also defined in very broad terms, such as being unable to meet "basic needs" that refer to the physical (food, health care, education, shelter, etc.) and non-physical (participation, identity, etc.) requirements of a "meaningful life" (Straighthen 1979). Nobel-prize winning economist Amartya Sen (1983) has related the concept of poverty to "entitlement." According to Sen, "entitlement" refers to the various bundles of goods and services over which one has command, taking into

consideration the means by which such goods are acquired (e.g., money, coupons, etc.) and the availability of the needed goods.

However, the concept of poverty is essentially related to deprivation and therefore can be analyzed in both absolute and relative terms. The absolute concept of poverty is related to physical need in terms of goods and services and the cost required to meet that need. In another words, absolute poverty is normally defined in relation to a minimum specified standard of living in terms of nutritional norms or basic needs (Sen, 1981). Absolute poverty may also be defined as "a condition of life so degraded by disease, illiteracy, malnutrition, and squalor as to deny its victims' basic human necessities" (Ayres 1984, pp.76-77). In the sense of absolute poverty, poor are those who are unable to maintain a minimum subsistence level (Momin, 1992).

Relative poverty, on the other hand, is nothing but the relative position of various income groups to each other. Poverty cannot be understood by isolating the poor and treating them as a special group. Because, society is seen as a series of stratified income layers, and poverty is concerned with how the bottom layers fare relative to the rest of society. The concept of poverty, therefore, must be seen in the context of society as a whole (M. Rein, 1970, p. 46). In this sense, poverty is regarded as a general form of relative deprivation, which is the effect of the maldistribution of resources. Specially, it refers to position of one group relative to the resources of others and indicates the relative deprivation of one group in comparison with another primarily due to maldistribution of resources (Rahman 1994, p.7). Poverty, however, means a condition of human beings living in the society, which is considered less than adequate by that society. The ultimate manifestation of poverty is hunger, malnutrition, retarded mental and physical development, ill health and early death. Directly relevant factors are low incomes emanating from low productivity and lack of access to resources. More specifically poverty is due to such factors as continuing low productivity especially in agriculture, unemployment, underemployment, low wages, low literacy compounded by inadequate access to education and unequal gender participation in economic decision making (Murshid KAS et al. 1994, p.19). In this paper, poverty is limited to absolute and relative conditions that the rural elderly are experiencing in their terminal part of life.



**Old-age and Aging:** The concept of old age, which is closely associated with the aging process, is difficult to define precisely. Because, the term 'old' is used to describe persons of different ages depending upon the circumstances and the area of operation. In spite of difficulties, a person is treated as having become old on the basis of certain criteria. In traditional and under developed societies, certain criteria are applied in describing a person as old. These are mainly changes of nervous system and general decline in physical and mental abilities, including arrival of grandchild, particularly the offspring of son (Marulasiddaiah 1966). Old age is viewed as a period of declining intellectual ability and slowing down of responses that occur as results of physical frailty and psychomotor changes (Hess and Markson, 1980. P. 120).

In view of this fact, aging may best be defined as survival of growing member of people who have completed the traditional adult roles of making a living and child rearing and years following the completion of these tasks represent an extension of life (Tibbits, 1960, p. 4). In fact, aging is an inevitable and irreversible biological process. Aging as a broad term can be viewed in the biological, psychological and socio-cultural context. In the socio-cultural point of view, aging refers to changes in the individual's changing circumstances as a member of family, community and society. The changes include completion of parental jobs, retirement from work, reduced income, diseased and disability, and need for support. In the context of Bangladesh rural poor society, older people are those who are heavily vulnerable in terms of physical survival, income, land and other resource entitlement, and experience socio-biological implications (such as physical frailty and morbidity), lower status in the family or community, insufficient purchasing power and dependency directly or indirectly on children, relatives and neighbors for food security (access to nutritious and appropriate food) shelter, health care and emotional support.

#### **Survival Pattern of the Elderly**

The term "Survival" is more applicable in analyzing the adjustment pattern of the poor elderly to the crisis situations of life. As the poor aged are



much more vulnerable in terms of basic needs fulfillment and social security, they are mostly involved in constant struggle to obtain necessities of life to preserve their existence. The poor aged, generally suffer from multidimensional problems of existence and have to make adjustment to the strained circumstances in life. The survival pattern of the poor aged, that is, how the aged live or exist, cope with adverse circumstances and manage to keep alive against all the uncertainties of life has been discussed in the following sections: economic activities, food intake, living arrangements and dwellings of the elderly.

### **Economic Activities**

The society of Bangladesh is gradually changing due to the influence of changing elements of social structure. At present, rural society is losing its some rural characteristics, particularly jointness of living, common economic activities, family functions and kinship network. Traditionally, Bangladesh villages belong to agro-based economy. In the past, family was the predominant production and consumption unit, which provided agricultural production and met consumption demands of its members. In addition, the members of the family were engaged more or less in the same economic activities. Today a drastic change of engagement in economic activities is observed in rural society. Family labors are being employed in a variety of economic and income activities. It is usually observed that the total family labors are not employed in agriculture, but day laborers including off-farm laborers are found sometimes to engage in agricultural activities.

In the rural societies of Bangladesh, a comprehensive change has taken place in economic activities as compared to the past. Over the past 20 years, income sources of rural families were limited mostly to the agricultural economic activities. Now families are being engaged in agricultural and non-agricultural economic activities as well. Agricultural sector of the rural economy is the main source of survival of millions of rural people. About 85 percent of the populations are directly dependent on agriculture that contributes to about 46 percent of GDP. Land takes the leading role in generating rural income. But 60-70 percent of the household do not possess adequate land to generate income for subsistence. Moreover, agro-based rural

economy is beset with multifarious problems — prevalence of overwhelming marginal and landless farmers, stagnant growth of agriculture, low productivity, low adoption of HYV (high yielding varieties) and so on. In recent years, landless is accelerating at a large scale because small holders cannot survive on the agricultural income and become compelled to sell their land and other properties (Motiur, 1994, p. 29).

In the study, it was observed that most of the households of the elderly were poor owning a little volume of holdings or nothing. And rapid population growth deteriorated the position of the elderly with regard to land ownership, food and nutritional intake and other necessary things. Families of the elderly having direst poverty represented more than a half of the population of the study area were more vulnerable to the phenomena. For survival, however, the older persons under study were found to be involved in a variety of economic activities. As most of the elderly were poor, they earned their livelihood by adopting diversified income earning activities. Out of the total (50) older persons, a few were small farmers who were found to engage in own farming. Besides, some of the poor elderly adopted additional income earning activities: farming own or share cropping in land, rearing milk cows and selling milk and fruits.

Only a few older persons who were landless were found to cultivate little volume of land on sharecropping basis that were not sufficient to support family with the crops produced. So, in addition to agricultural activities, they had to resort to some off-farm activities for earning and subsistence. About one-third of the older persons lived primarily on daily wage works. Besides, some of the elderly were engaged in petty business, petty services and other activities that were available in the locality. But since most of them could not rely on a single occupation, they had to switch to other seasonal activities like brick works, house making and repairing, roof making, and winter crops picking.

According to the respondents, 26 widow elderly led their lives in strait circumstances along with low status in the family. In particular, the widows who were supposed to be redundant and burden in the eyes of sons or daughters-in-law were bound to do domestic works. In some cases, they had to carry out works as maidservant. Majority of the works done by them were cleaning, childcare, fuel and fodder collection, looking after poultry and so



forth. Apart from that, they assisted in other homestead based activities. In spite of doing domestic works, a few of them were found to be subjected to inhumane mental as well as physical torture of all sorts. They were also at times deprived of required meals or other things that they thought suited for their physical survival.

Among the widow elderly, 7 were found to engage in low-paying petty jobs as maidservant or cook. Some cooked food as cook for students in private messes. Others were engaged as maidservant either in the houses of rich neighbors. They were also found to work as hired laborer in agriculture sector, especially in the production and harvesting season of the year. They mostly worked in processing paddy, rice, picking winter crops such as potatoes, brinjal, chillies, cabbage, and arum, helping in home making and repairing and so on. They were also employed as hired laborer for seeds drying, crops crushing, rice drying and crushing. They also carried out some domestic works such as washing cloths, cleaning, water fetching, and childcare. Only 4 older women who had nobody to render help in crisis situation of life had to shift for them by using all possible means. They earned their livelihood by engaging in some farm and off-farm income generating activities. They worked sometimes as wage laborer in such activities as post-harvest processing, washing and cleaning and other domestic works. They worked mostly in the well-to-do families in exchange of wage paid in cash and in some cases for food three times a day.

The respondents reported that a substantial majority of the elderly, male and female were engaged in agricultural activities such as crop production, poultry raising, livestock raising and care, milch cows keeping and milk selling. A few elderly women raised poultry and earned money from egg sale and purchased low priced food for survival. In addition, a few of them living in direst poverty were found to engage in earning activities like sewing and handiwork, mat making with the leaves of date tree and selling, net weaving and so on. In the study, the elderly who possessed homestead plot, not more than 10 decimals, were found to well manage kitchen gardens, fruit gardens and produced garlic, onion, potatoes and so on. But they produced turmeric, ginger in shady area or under the tress with proper management. All the crops produced in homestead plot supplemented family incomes, augmented home consumption and reduced family

expenditures. With the income from crops produced, they could not afford foods for family consumption for the whole year.

Among the elderly, 7 were found to engage in petty business. Most of them were engaged in grocery, green grocery, hawkery, mat making and selling, poultry raising, egg and fruit selling and so on. They reported that they could not support family with meager income from petty business. As a result, some of them employed themselves as wage laborer in agricultural and non-agricultural income activities. They were employed as wage laborer when their business remained deadlock or hampered for sometimes due to non-profitability and unavailability of business commodities and materials. Of the elderly engaged in petty business, only a few who owned a small cultivable land managed to grow paddy and seasonal crops that supplemented household consumption for about one or two months.

Two elderly reported that they subsisted on the income from petty service. They were employed as temporary cook, guard, and gardener on the basis of payment for working days. With the scanty income from petty service, they could not afford daily necessities for the household and as a result, were found to engage in agricultural activities such as crops production, livestock raising, poultry raising, milch cows keeping and milk selling. But when their nominal cash earnings and food were threatened with uncertainty, many of them employed themselves in a wide variety of income activities such as handicrafts making, vegetables growing and selling, milk selling, and marginal farming. According to some petty service holders, they earned large portion of monthly income particularly from milk selling.

It was observed in the study villages that only two elderly women who were found to be rootless and helpless because of not having home of their own, any asset, and any earning sons or relatives who could contribute to their well-being as supports. They have been lived alone since their husband died. They were not found to be in a position to support them. So they had to resort to the occupation of begging and survived on it. For their physical survival, they begged alms from door to door and managed foods and other things from begging-income.

Of the elderly, 6 survived on the earnings from rickshaw pulling. They were found to support family in hardship. Though their physical stamina was not supposed to be strong enough, they were bound to engage in



hard and painstaking job like rickshaw pulling. But they pulled rickshaw with interval and rest when they got tired and fatigued. Some of them who did not own any rickshaw hired rickshaws and paid Tk<sup>6</sup> 30-40 daily to its owners. With a multiplicity of discomforts in life, they pulled rickshaw only for existence. They thought all the sufferings at the terminal stage of life as the result of lot that was ordained by God.

According to the respondents, larger majority of the elderly lived in overmuch miserable condition especially in respect of basic needs. They lived mostly under subsistence level other than only a few living at subsistence level. In order to survive, they did not rely on one occupation, but switched to different agricultural and non-agricultural activities available to them. In some cases, they engaged in more than one economic activity a day. But it was observed that with the income through different economic activities, the poor elderly could not maintain themselves and their families as well. The poor elderly were, as a matter of fact, found to experience the struggle for survival.

### **Food Intake**

This section deals with what kinds of food the poor had and how they survived in the dearth of basic thing like food. In the study area, the poor elderly mostly lived at or under subsistence level. In some cases, they were found to live in slight solvency. But the poor elderly had little control of what and when they would eat. It was certainly linked with their income, manner of earning and socio-economic status of their family. In particular, a significant number of the elderly had no income and they were mostly dependent directly on the earnings of sons, daughters, wives, relatives and even neighbors. As a result, they had to have foods as their providers could afford. Only a few elderly who were engaged in agricultural production were found to be rather able in affording foods, but that were not sufficient to consumption demands of their families.

Most of the elderly had uncertain and irregular income that was not sufficient to afford foods. From the study, it was found that the poor elderly could not manage nutritious foods needed for sound physical survival. Most of them were found to take cheaper foods having less food value and

nutrients. In addition, a few of them could not have a square meal a day and even could not eat rice three times daily. In fact, many of them were found to be on starvation diet.

As regards food intake, the poor elderly reported that their common items of food intake were rice, wheat bread, pantha, muri (Bengali dishes) and so on. But due to incapability of buying fish, meat, milk, egg and vegetables from open market, most of the poor elderly were found to have vegetable curry consisting of cheap indigenous leafy vegetables produced in homestead plots or collected from agricultural lands, ponds and ditches. As daily food intake, good many of the poor elderly took a too low carbohydrate and protein intake for particular 24-hour day. It was reported that the per capita intake of rice, wheat flour was merely 6 chattaks and three chattacks respectively (one chattack is equivalent to 62.5g) whereas for the elderly employed in day labor, wage work, rickshaw-pulling should not be less than 450 gms, half of a seer of rice (one seer approximates to 1 kg) and/or wheat flour. Exact measurements were, of course, not possible because the poor elderly did not maintain any written records, and they mostly depended on memory.

According to the respondents, many of the poor elderly took one meal a day although a few elderly with a little stable source of income could afford two or three meals a day. Moreover, the wage laborers, the rickshaw-pullers and the beggars did not usually eat any mid-day meal at home. Foods were cooked normally at home either in the morning or in the evening. If the day's earnings were uninterrupted, they maintained the same manner of cooking and eating. A few of the elderly were found to set aside a smaller portion of the cooked rice for the next morning's breakfast called pantha<sup>7</sup>. But most of the elderly especially wage laborer, rickshaw-pullers took 2-3 rutis (wheat bread), pantha, or some quantity of muri (fried rice) with or without a little amount of gur (sweets) as breakfast. During the period of investigation, the food-intake pattern of a few poor elderly was: pantha in the morning, wheat breads at noon and rice or khichuri (a combination of rice, pulse, and species) in the evening. The elderly having more than 5 members in the household were found to have occasionally meat or fish curry in dinner.

It was also observed that some of the poor elderly took wheat bread as food in the place of rice not because of food value consideration. They took



wheat bread mostly considering its conduciveness to satisfy more consumption demands of more family members. Among the elderly, 10 widowed reported that they could not have milk, fish and meat dishes more than once or twice a week. They usually had rice, wheat bread with vegetables, pulse and so forth. The widowed elderly who lived in the houses of poor sons, sons-in-law and daughters were found to experience a considerable number of sufferings. In particular, some of them could not have a square meal in most days of the month. In addition, a few of them were treated as redundant and burden in the family, and foods provided for them were not supposed to be suited to their physical demands. They were found to live dismally with great pains and distress on the earth. Only two widowed elderly who survived on begging were found to go out for begging alms with or without eating pantha or rice. If they were lucky enough, they would find out some kind-hearted persons who provided them with some food. Otherwise, they starved for the whole day. They cooked day's alms in kind in the evening and bought oil, salt chillies, potatoes and so on with their nominal cash income. The curry they took with rice was invariably consisted of leafy vegetables, arum leaves or low priced kheshari pulse and potatoes.

It was also found that 7 older women working as maidservant had a nominal quantity of morning or mid-day food although, in some cases, they were given nominal wage both in cash and in kind. Women working as cook, in particular, took food as breakfast in the morning and lunch at noon. Of course, two elderly maidservants whose husbands were retired from workforce due to illness and survived on their earnings brought cooked food home very often. All the household members shared such cooked food in the evening, and on some days, part of that food was set aside for next morning's breakfast, if possible.

The elderly who were engaged in petty jobs and petty trades had more or less stable flow of income were found to be in a better position to afford foods as compared to those elderly who lived on begging, wage work and rickshaw-pulling. Some of them reported that they were able, to some extent, to manage sustaining foods like eggs, fish, meat, milk sugar and so on, although these were not their regular food items. From the study experience, it was obvious that a substantial majority of poor elderly lived in direst poverty and hardship. They could not satisfy their basic requirements of food

intake with heart's content. In deed, they survived on inadequate food intake and existed on earth with sufferings and discomforts.

### **Living Arrangements**

This section represents how and with whom the poor elderly live in the household. In rural settings, most old people live in the households with other people: husbands or wives, children, relatives and others. This mode of living is the result of many factors, among them dependency on agricultural productions, the earning of adult sons, help from children in times of crises (economic insecurity and health care problems) and most important, cultural values which stress joint-living for the security of all the family members so long as possible. But independent living with individualistic attitude among the children is also prevalent in rural society. However, most of the older people in rural society are not complete physically isolated from their children, though the living arrangements of older with and without children differ markedly. It is usually observed that majority older people who have children live close to at least one child and see him often. Further, many older people who have no living children do have some young relatives whom they see often and to whom they would turn in time of needs.

Apart from that, differences in marital status are responsible for many of the differences in living arrangements of men and women. The age composition of the groups of men over 60 differs from that of women over 60. Women, in general, outlive men. As a result, older women are more likely than older men to live alone or as widowed parent in the home of adult sons or daughters. In the study, this pattern of living arrangement was found to be higher among the widowed elderly. The elderly who were widowed or enfeebled, having houses of their own and homestead plot were found to share home with their children.

According to the respondents, older persons living separately in the same households were not isolated, either physically or mentally from others of the family. Older people who had children generally lived close to at least one of them so that they could see their children often. Even a few children who lived at a little distance took care of their parents occasionally. It was also observed that older people who maintained good communication and



relationship with their children were found to take care of by their children, although they lived in separate households. A few older persons reported that their children were their most frequent or usual visitors but did not take care of them because they were out of capacity for providing necessary things for their parents. But older persons without living children reported that they were especially attached to some young relatives because they took the place of children and took care of them in time of needs and services.

Among the elderly, 2 widow elderly who had no adult earning sons were found to live in the houses of daughters. One widow elderly who subsisted on begging lived in the houses of neighbors. Because she had nobody to support her and was economically unable to build a simple house. Among the elderly, 25 reported that they owned home, in which they have been lived at least 20 years. And about 15 older persons have lived in their present homes. Only 7 elderly widows have lived in their present neighborhoods at least 5 years. It was observed that living with children or relatives was most preferred and expected by those who had no children. But some of the elderly having children lived in the households separate from their children were most likely to oppose living with children because of diversified familial infelicities for joint-living. It was found in the study that majority of the older persons, male and female were found to live with their children, although some of them lived separately from their children in the same household. Only one elderly living with his son took food together but slept in *Mazar*<sup>8</sup> due to lack of available sleeping room in the house. Three widowed elderly lived in those houses where they worked as maidservant. But they lived for short period of time during illness in the houses of sons who did not take care of them regularly. In the study, it was also found that majority of the elderly lived in the houses of their own, although some of them possessed only homestead plot where they constituted miniature houses and lived in.

### **Dwellings of the Elderly**

This section deals with the pattern of dwelling units that the poor elderly occupy. A basic function of houses is to provide shelter to their occupants. The durability of such shelter is an important qualitative measure

of housing situation. Most dwelling units of the poor elderly could be termed as hut (semi-permanent or rustic) following the UN classification (Sadeque, 1990).

It was observed in the study that the poor elderly resided in miniature houses that were mostly constructed on homestead plot. The size of homestead plot were within from 1 to 3 Kathas (1.65 decimals to about 5 decimals), and a single member family or a joint family with 5 or more members were found to live in the houses built on that homestead plots. Most dwellings were built solely with locally available materials such as bamboo, palm straw or leaves of indigenous plants. Moreover, most of the dwellings were substandard and any of houses were dilapidated and unsafe because majority of the dwelling units consisted of mud or straw wall and straw roof. The houses of some older persons who possessed little volume of cultivable land were built of brick wall and tin roof. In addition, a few elderly who were petty service holder and petty trader had the houses of brick wall and tin roof. The very poor elderly lived in the houses of earthen plastered bamboo wall or straw wall and straw roof.

It was found that a great majority of the houses were mud wall and tin roofed. But, the poor elderly, on account of financial stringency, made their houses placing tin sheets on the roof with the help of bamboo. Tin sheets were very often placed on the roof with the bamboo putting pressure from above to help maintain some balance. A few elderly who were very poor built houses on a bamboo structure with thatch roof and bamboo fencing. It was also found that the dwelling units were mostly weak in structure. In many instances, roof leaks let rainwater pass through the mud walls making them weaker day by day. Moreover, the roofs of the houses were so low that the occupants had to crawl into their houses. Many of the units had simply no door and hence lacked safety and security.

It is disheartening to note that the larger majority of the dwelling units were of one or two living room without having enough stuffy windows. Most of the dwellings were seriously lacking both internal and external ventilation. Besides, a good number of the dwelling remained dark even during daytime and they lacked sufficient light and air. It was also overwhelmingly observed that most of the houses were single roomed. The average floor space in each room were supposed to be approximately 120-150 square feet that were not



sufficient for accommodating all the family members. Such low substandard dwelling units, as a matter of fact, were not found to satisfy the requirements for sleeping and rest. In a good number of houses, some of the family members, especially the elderly were found to sleep in veranda that were bamboo supported and tin or straw roofed. Apart from that, many of the elderly having moderate or large sized family had to share room even with grown-up children mainly because of inadequacy of sleeping rooms. In a few cases, the poor elderly who lived in the houses of their sons were found to sleep at *mazar* at night or in neighbors' houses due to lack of accommodation. It was also observed that a few elderly possessed a hut, a kitchen and cowshed situated in the same homestead. They were found to live in those small houses with poultry and livestock.

### **Conclusion and Policy Implications**

This paper represents the circumstances under which the poor aged are living. Because of poverty, the rural poor aged are experiencing a multiplicity of survival problems. It is very disheartening that a large number of poor cannot satisfy most of their basic needs and survived in want and sufferings. In view of the overall situation of the poor elderly, effective remedial measures are to be necessarily taken so that the aged may have economic, health and emotional security from the family of origin and the society.

To achieve this goal, this paper suggests that social security programs for the poor aged may be introduced and ensured by the government. Because of social, economic, institutional and other resource limitations, Bangladesh government may work with the help, support and partnership of local, national, international organizations, which are conducting programs for the benefit of the weaker segment of population in the rural society. Old-age allowance including other reasonable benefits may be taken up as security program. Skill development training program can be designed so that the poor aged can produce more income by investing their skill and experiences in productive works. Viable production centers may be organized to increase their income generating potential. They should also be made accessible to credit facilities so that they can utilize the money for earning extra income

for the family. Over and above, extensive research on different aspects of elderly problem, especially the conditions affecting the lives of rural olds should be carried out and necessary measures should be taken for appropriate management of the problems of the rural poor elderly.

### Notes

- 1 The most commonly used way to measure poverty is based on incomes or consumption levels. A person is considered poor if his or her consumption or income level falls below minimum level necessary to meet basic needs. This minimum level is usually called the "poverty line." Poverty lines vary in time and place, and each country uses lines, which are appropriate to its level of development, societal norms and values (World Bank).
- 2 National average per capita income of Bangladesh is US \$ 370 (2000 est.).
- 3 Convenience sample refers to non-probability sample, a sample that has not been selected using a random selection method. A convenience sample is one that is simply available to the researcher by virtue of its accessibility (See Bryman Alan, 2001. Pp. 85, 97).
- 4 In terms of land ownership, people who belong to less than one acre (approximately .5 hactre) are considered landless poor in Bangladesh.
- 5 See Cresswell, W., p. 153.
- 6 TK. stands for Taka, the unit of Bangladesh Currency.
- 7 Pantha consisting of cooked rice and water, which is usually eaten by the poor as breakfast.
- 8 A place of practicing spiritual knowledge by the sect, a religious group whose beliefs differ from those of most people in the society.

### REFERENCES

- Ayres, Robert L., *Banking on the Poor: The World Bank and World Poverty*, Cambridge: The MIT Press, 1984.
- Bryman Alan, *Social Research Methods*, New York: Oxford University Press Inc., 2001.
- Chen Martha Alter, *A Quiet Revolution: Women in Transition in Rural Bangladesh*, Dhaka: BRAC Prakashana, 1986.
- Creswell, John W., *Research Design: Qualitative and Quantitative Approaches*, California: Sage Publications, Inc., 1994.
- Gerald, Meier M., *Leading Issues in Economic Development*, Delhi: Oxford University Press, 1990.



- Hess, B. Beth and Markson W. Elizabeth, *Aging and Old age: An Introduction to Social Gerontology*, New York: Macmillan Publishing Co., Inc., 1980.
- Kambur, S.M. Ravi, "Measurement and Alleviation of Poverty with Application to Effects of Macro-Economic Adjustments," *IFM Staff Papers*, Vol. 34, No., 1, 1987.
- Mahtab, Fasihuddin and Karim, Zahurul, Population and Agriculture Land Use: Towards and Sustainable Food Production System in Bangladesh, *AMBIO, A Journal of Human Environment*, Vol. XXI, No. 1., 1992.
- Marulasidiah, H. M., "The Declining Authority of Old People," *The Journal of Social Work*, Vol. 27., No. 2, July 1966.
- Momin, M. A., *Rural Poverty and Agrain Structure in Bangladesh*, New Delhi: Vikas Publishing House Pvt. Ltd., 1992.
- M. Rejn, "Problems in the Definition and Measurement of Poverty," In Peter Tounsend (ed.), *The Concept of Poverty*, London: Heineman, 1970.
- Murshid KAS, et, al., Human Resource Development and Poverty Alleviation in Bangladesh, MAP, *Monitoring Adjustment and Poverty Focus Study Series* No. 2, CIRDAP, 1994.
- Rahman, M. Habibur and Parvin F. Rezina, Prabin: Ekti Samajik Jariper Pratibethon, *Dhaka Bishawbiddalaya Patrica*, Vol. 47, 48, January 1996.
- Rahman, Motiur, *Poverty Issues in Rural Bangladesh*, Dhaka: University Press Limited, 1994.
- Rahman, Fazlur, "Over Population: A Major Cause of Environmental Pollution," *Prazanma*, Years 13. No. 6, March 1994.
- Sadeque, Mohammad, *Survival Pattern of the Rural Poor: A Case Study of a Village in Bangladesh*, New Delhi: Northern Book Center, 1990.
- Sen, A. K., *Poverty and Famines: An Essay on Entitlement and Deprivation*, Oxford University Press, 1981.
- Sen Amartya, *Poor, Relatively Speaking*, Economic and Social Research Institute, Dublin, 1983.
- Tibbitts C. and Donahua, W. (ed.), *Social and Psychological Aspect of Aging*, New York: Colombia University Press, 1992.
- United Nations, "Mortality and Health Issues in Asia and the Pacific," *Asian Population Studies Series*, No. 78, Bangkok: ESCAP, 1987.
- United Nations Development Program: *Human Development Report*, 1999.
- World Bank Report, 1998.